

**UNITED STATES DISTRICT COURT
DISTRICT OF NEW JERSEY**

Jason Kokinda

(In the space above enter the full name(s) of the plaintiff(s).)

- against -

Essex County Correctional Facility

John Doe #1 Food Policymaker

John Doe #2 Shift Supervisor(s)

John Doe #3 Correctional Officer(s)

Jane Doe #1 Prison Doctor

(official and personal capacities for all)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, address and telephone number. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff	Name	Jason Kokinda
	Street Address	440 Dunkard Ave., Apt #7
	County, City	Monagalia County, Westover
	State & Zip Code	West Virginia, 26501
	Telephone Number	(802)-391-0921

COMPLAINT

Jury Trial: ☒ Yes ☐ No
(check one)

- B. List all defendants. You should state the full name of the defendants, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant can be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name Essex County Correctional Facility
 Street Address 354 Doremus Ave.
 County, City Essex County, Newark
 State & Zip Code New Jersey, 07105

Defendant No. 2 Name John Doe #1, Food Policymaker
 Street Address 354 Doremus Ave.
 County, City Essex County, Newark
 State & Zip Code New Jersey, 07105

Defendant No. 3 Name John Doe #2, Shift Supervisor(s)
 Street Address 354 Doremus Ave.
 County, City Essex County, Newark
 State & Zip Code New Jersey, 07105

Defendant No. 4 Name John Doe #3, Correctional Officer(s)
 Street Address 354 Doremus Ave.
 County, City Essex County, Newark
 State & Zip Code New Jersey, 07105

II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. There are four types of cases that can be heard in federal court: 1) Federal Question - Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case; 2) Diversity of Citizenship - Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case; 3) U.S. Government Plaintiff; and 4) U.S. Government Defendant.

- A. What is the basis for federal court jurisdiction? (*check all that apply*)

☒ Federal Questions ☐ Diversity of Citizenship
☐ U.S. Government Plaintiff ☐ U.S. Government Defendant

- B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? 42 U.S.C. Sec. 1983 and ADA

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship N/A

Defendant(s) state(s) of citizenship N/A

III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? At the Essex County Correctional Facility

B. What date and approximate time did the events giving rise to your claim(s) occur? January 21st, 2019 to about February 12, 2019

C. Facts: Mr. Kokinda was brought to the facility as a fugitive from justice to

be extradited to Vermont on a malicious warrant. He refused to sign the medical form and was punished for exercising his discretionary rights by being held in a holding cell with no mattress or blanket for about a week. Then he was transferred to a block. He was perpetually refused accommodation for his serious IgE soy allergy throughout his stay. He sought accommodations at all times and was never accommodated.

The only thing that he ate were the tiny portions of vegetables and bread. He had lost a lot of weight and also started to develop headaches and hypertension issues from the heavy preservatives they put in the food, which interfere with blood pressure regulation and caused him agitation. The failure to accommodate is a

very common situation that he has been abused by at numerous facilities because the courts refuse to make them accountable, and they buy food by the pallet and won't purchase any individual meals or formulate a balanced diet if it costs

them one cent extra or forces them to lift a finger. And it is apparent that the state attorney generals are telling them to operate in this manner and to do as they please because they will protect them from liability in the courts by

using sophisms, retaliations, and claim evasion. Mr. Kokinda is unsure of the names of the particular officials who he interacted with or were supervisors.

This will have to be deduced by the records of who worked those days in intake, etc.

What happened to you?

Who did what?

Was anyone else involved?

Who else saw what happened?

IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. Mr. Kokinda suffers extremely painful myalgias that paralyze him if he eats any soy. The symptoms last for days. By trying to avoid soy, he lost weight, suffered hunger pains, and also felt malaise and hypertension symptoms from the heavy preservatives in the scant food he did try to eat. Mr. Kokinda suffered emotional damages from the added stress this caused him and indignation. The stress also exacerbated his OCD symptoms and caused agitation. And when he was held in a tiny, cold, holding cell in intake for a week, he suffered from painful muscle cramps, chills, severe discomfort, and emotional trauma. He did not know when this would all end and felt as though he was being retaliated against and that they would possibly try to kill him through denial of diet and medical neglect.


V. Relief:

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation.

The basis for compensation is the emotional and physical injury and the need to deter jails from taking IgE allergies lightly and to hold them accountable for what are facially unconstitutional municipal policies. Vermont was very good in instantly accommodating Mr. Kokinda with a high-quality soy-free diet at all facilities. These unconstitutional policies seem to be rooted in racism and class status and inherently trickle down to affect anyone living in those areas where a lot of low class and minority prisoners are housed. It may also be due to the larger volume of prisoners and their lack of representation to file any well-articulated lawsuits for damages as a deterrent.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 19th day of January, 2021.

Signature of Plaintiff 

Mailing Address 440 Dunkard Ave., Apt #7
Weston, WV 26501

Telephone Number 802-391-0921

Fax Number (if you have one) _____

E-mail Address jkoda@jkoda.org

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint.

Signature of Plaintiff: 

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